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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Yvonne First name L. Middle name		First name Middle name
	Bring your picture identification to your meeting with the trustee.	Williams Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7978		

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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)			
	3	EINs	EINs			
5.	Where you live	1079 N. Milwaukee , Apt. B	If Debtor 2 lives at a different address:			
		Chicago, IL 60642 Number, Street, City, State & ZIP Code Cook County If your mailing address is different from the one	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it			
		above, fill it in here. Note that the court will send any notices to you at this mailing address.	in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Yvonne L. Williams

Debtor 1

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Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When Case number District When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

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Debtor 1	Yvonne L. Williams			Case number (if known)		

Pari	Report About Any Bu	sinesses	You Owr	as a Sole Proprieto	or			
12.	Are you a sole proprietor of any full- or part-time business?	ıll- or part-time ■ No. Go to Part 4.						
		☐ Yes.	Name	and location of busir	ness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, State	e & ZIP Code			
	it to this petition.		Chec	k the appropriate box	to describe your business:			
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))			
				☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))				
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline: operation	ou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate addines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of prations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure 1 U.S.C. 1116(1)(B).					
	For a definition of small	No.	I am r	not filing under Chapte	er 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankru Code.				
		☐ Yes.	I am f	iling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4: Report if You Own or	Have Any	, Hazardo	ous Property or Any	Property That Needs Immediate Attention			
	Do you own or have any	■ No.	Trazar ac	740 1 10 00 11 11 11 11 11 11 11 11 11 11	Troporty That House Illinounce American			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No.	What is	the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is	s the property?	Number Chart City Chate 9 7 or de			
					Number, Street, City, State & Zip Code			

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Debtor 1 Yvonne L. Williams

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 54 Case number (if known) Debtor 1 Yvonne L. Williams Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Yvonne L. Williams Yvonne L. Williams Signature of Debtor 2 Signature of Debtor 1 Executed on April 25, 2016 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Yvonne L. Williams

Case number (if known)

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David M. Siegel	Date	April 25, 2016	
Signature of Attorney for Debtor		MM / DD / YYYY	
David M. Siegel			
Printed name			
David M. Siegel & Associates			
Firm name			
790 Chaddick Drive			
Wheeling, IL 60090			
Number, Street, City, State & ZIP Code			
(0.47) 500 0400			
Contact phone (847) 520-8100	Email address		
#06207611			
Bar number & State			

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Page 8 of 54 Document Fill in this information to identify your case:

Debtor 1	Yvonne L. Willian	ns		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				☐ Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filling amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your as Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,761.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	7,761.00
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	4,025.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,360.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	23,936.0
	Your total liabilities	\$	30,321.00
Pai	tt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,120.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,120.0
Pai	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
	■ Yes		

the court with your other schedules. Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,360.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,360.00

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Fill in this inform	ation to identify your ca	se and this filing:			
Debtor 1	Yvonne L. Williams	3			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the: N	IORTHERN DISTRICT OF ILL	INOIS		
Case number			_		☐ Check if this is an amended filing
					amended ming
Official For	m 1064/B				
	A/B: Prope	arta.			40/45
		tems. List an asset only once. If	an asset fits in more than o	one category list the asset i	n the category where you
think it fits best. Be	as complete and accurate space is needed, attach a s	as possible. If two married peop separate sheet to this form. On the	le are filing together, both a	re equally responsible for s	supplying correct
Part 1: Describe E	Each Residence, Building, L	and, or Other Real Estate You O	wn or Have an Interest In		
1. Do you own or ha	ave any legal or equitable ir	nterest in any residence, building	, land, or similar property?		
■ No. Go to Part	2.				
☐ Yes. Where is	the property?				
Part 2: Describe Y	our Vehicles				
□ No ■ Yes	cks, tractors, sport utilit	ty vehicles, motorcycles			
3.1 Make: F	lyandai	Who has an interact in t	no proporty? Obselver	Do not deduct secured	claims or exemptions. Put
_	Sonata	Who has an interest in the	ie property? Check one		red claims on Schedule D: aims Secured by Property.
	007	Debtor 1 only ☐ Debtor 2 only			
Approximate	mileage:	Debtor 1 and Debtor 2	only	Current value of the entire property?	Current value of the portion you own?
Other inform	ation:	At least one of the deb	tors and another		
	s Finance Lien \$4,025.00	Check if this is comn (see instructions)	nunity property	\$3,025.00	\$3,025.00
Examples: Boats No Yes Add the dollar pages you have	s, trailers, motors, persona value of the portion you ve attached for Part 2. W	/s and other recreational veh al watercraft, fishing vessels, s u own for all of your entries of rite that number here	nowmobiles, motorcycle a	ey entries for	\$3,025.00 Current value of the portion you own?
					Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property

Examples: Major appliances, furniture, linens, china, kitchenware

6. Household goods and furnishings

 \square No

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■ Voc	Describe				
— 163.					¢200.00
	House	nold Goods	s & Furniture		\$300.00
□ No	les: Televisions and radios; including cell phones, c	ameras, med		pment; computers, printers, scanners; music o	
	TV & E	lectronics			\$200.00
Example No	ibles of value les: Antiques and figurines; other collections, memo			oks, pictures, or other art objects; stamp, coin	, or baseball card collections;
Example No	nent for sports and hobbie les: Sports, photographic, e. musical instruments		other hobby equipment;	bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No	ms ples: Pistols, rifles, shotguns Describe	s, ammunition	n, and related equipmer	nt	
□ No	es ples: Everyday clothes, furs Describe	, leather coat	s, designer wear, shoes	s, accessories	
	Normal	Clothing			\$500.00
■ No □ Yes.	ples: Everyday jewelry, cost Describe	ume jewelry,	engagement rings, wed	dding rings, heirloom jewelry, watches, gems,	gold, silver
<i>Exam</i> µ ■ No	nrm animals ples: Dogs, cats, birds, hors Describe	es			
■ No	ther personal and househouse Give specific information		u did not already list,	including any health aids you did not list	
	the dollar value of all of yo art 3. Write that number h			any entries for pages you have attached	\$1,000.00
	escribe Your Financial Assets				
Do you ov	wn or have any legal or eq	uitable inter	est in any of the follow	ving?	Current value of the portion you own? Do not deduct secured

claims or exemptions.

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Case number (if known) Document Debtor 1 Yvonne L. Williams 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes. 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **Checking Account** 17.1. **Private Bank** \$300.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ioint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. $\hfill \square$ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: **ERISA Qualified** \$436.00 **Annuities ERISA Qualified** \$3,000.00 401(k) 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No

☐ Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☐ Yes.....

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

☐ Yes. Give specific information about them...

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Case number (if known) Document Debtor 1 Yvonne L. Williams 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

Schedule A/B: Property

■ No

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

Official Form 106A/B

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$3,736,00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Debtor ²	Case 16-13978 Yvonne L. Williams	Doc 1	Filed 04/25/16 Document	Entered 04/25/16 12:34:43 Page 14 of 54 Case number (if known)	Desc Main	4/25/16 12:12
`	ou own or have any legal or equ	itable interest	in any business-related p	roperty?		
■ No.	Go to Part 6.					
☐ Yes	s. Go to line 38.					
D. 10	D		Dalata I Baranda War G			
	Describe Any Farm- and Comm If you own or have an interest in fa			n or Have an Interest In.		
46. Do y	ou own or have any legal o	r equitable in	iterest in any farm- or	commercial fishing-related property?		
■ 1	No. Go to Part 7.					
	Yes. Go to line 47.					
Part 7:	Describe All Property You	Own or Have a	n Interest in That You Did	d Not List Above		
	you have other property of a amples: Season tickets, countr					
■ No)					
□ Ye	es. Give specific information					
54. A d	ld the dollar value of all of y	our entries fr	om Part 7. Write that n	umber here		\$0.00
Part 8:	List the Totals of Each Part	of this Form				
55. Pa	rt 1: Total real estate, line 2					\$0.00
56. Pa	rt 2: Total vehicles, line 5			\$3,025.00		
57. Pa	rt 3: Total personal and hou	sehold items	s, line 15	\$1,000.00		
58. Pa	rt 4: Total financial assets, I	line 36		\$3,736.00		
59. Pa	rt 5: Total business-related	property, line	e 45	\$0.00		
60. Pa	rt 6: Total farm- and fishing-	-related prop	erty, line 52	\$0.00		

\$0.00

Copy personal property total

\$7,761.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

61.

\$7,761.00

\$7,761.00

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		Docume	nt Page 15 of 54	4/20/10 12.12118
Fill in this infor	mation to identify your	case:		
Debtor 1	Yvonne L. Williar	ns		
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	-
Case number (if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Proper	y You Claim as Exempt
-----------------------------	-----------------------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2007 Hyandai Sonata Kia Motors Finance	\$3,025.00		\$2,400.00	735 ILCS 5/12-1001(c)
Secured Lien \$4,025.00 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Household Goods & Furniture Line from Schedule A/B: 6.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Life from Schedule AVD. 4.1			100% of fair market value, up to any applicable statutory limit	
TV & Electronics Line from Schedule A/B: 7.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Elle Holli Genedale PAB.			100% of fair market value, up to any applicable statutory limit	
Normal Clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
Life from Schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	
Checking Account Private Bank	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	

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Troinio El Trimanio					
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	he Amount of the exemption you claim Specific laws that allow exemption			
	Copy the value from Schedule A/B				
ERISA Qualified Annuities	\$436.00	•	\$436.00	735 ILCS 5/12-1006	
Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
ERISA Qualified 401(k)	\$3,000.00	•	\$3,000.00	735 ILCS 5/12-1006	
Line from Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit		
Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustme	nt.)	
☐ Yes. Did you acquire the property cove☐ No	red by the exemption wit	thin 1	.215 days before you filed this case	?	

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Document Page 17 of 54 Fill in this information to identify your case: Debtor 1 Yvonne L. Williams Middle Name First Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports this portion value of collateral. claim If any \$4,025.00 Kia Motors Finance Describe the property that secures the claim: \$3,025.00 \$1,000.00 Creditor's Name 2007 Hyandai Sonata **Kia Motors Finance** Secured Lien \$4,025.00 PO Box 20835 As of the date you file, the claim is: Check all that Fountain Valley, CA apply 92728-0835 ☐ Contingent Number, Street, City, State & Zip Code Unliquidated □ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured) ■ Debtor 1 only car loan) Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another Judgment lien from a lawsuit **Purchase Money Security** ☐ Check if this claim relates to a Other (including a right to offset) community debt Date debt was incurred 09/09 Last 4 digits of account number 0657 Add the dollar value of your entries in Column A on this page. Write that number here: \$4,025.00 If this is the last page of your form, add the dollar value totals from all pages. \$4,025.00 Write that number here: Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1 **Kia Financial Services** 10550 Talbert Ave. Last 4 digits of account number _

Official Form 106D

Fountain Valley, CA 92708

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Debtor	1 Yvonne L. Wi	Iliams		Case number (if know)
	First Name	Middle Name	Last Name	
	Name, Number, Street, Kia Motor Financ PO Box 650805 Dallas, TX 75265			On which line in Part 1 did you enter the creditor?

		Documer		<u> </u>			
Fill in this information	on to identify your cas	e:					
Debtor 1	vonne L. Williams						
	irst Name	Middle Name	Last Nan	ne			
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Nan	ne			
United States Bankru	ptcy Court for the: N	ORTHERN DISTRICT (OF ILLINOIS				
Case number							
(if known)						_	if this is an
						amen	ded filing
Official Form 1	06F/F						
	Creditors Who	a Havo Uneocu	rad Claim	16			12/15
	curate as possible. Use Pa						
Part 1: List All of	Your PRIORITY Unsec	cured Claims					
 Do any creditors h. No. Go to Part 2 Yes. List all of your pricidentify what type of possible, list the clair 	ave priority unsecured cla	aims against you? a creditor has more than or oth priority and nonpriority according to the creditor's na	amounts, list that me. If you have r	claim here a	nd show both priority a	ind nonpriority amour	nts. As much as
 Do any creditors h No. Go to Part 2 Yes. List all of your pricidentify what type of possible, list the clair Part 1. If more than 	ave priority unsecured cla brity unsecured claims. If a claim it is. If a claim has be ims in alphabetical order ac	aims against you? a creditor has more than or oth priority and nonpriority according to the creditor's naular claim, list the other creditor.	amounts, list that me. If you have r ditors in Part 3.	claim here and more than two	nd show both priority a	aind nonpriority amour aims, fill out the Cont	nts. As much as inuation Page of Nonpriority
 Do any creditors h. No. Go to Part 2 Yes. List all of your pricidentify what type of possible, list the claid Part 1. If more than (For an explanation 	ave priority unsecured claims. If a claim it is. If a claim has been in alphabetical order acone creditor holds a particu	aims against you? a creditor has more than or oth priority and nonpriority according to the creditor's naular claim, list the other credithe instructions for this form	amounts, list that me. If you have r ditors in Part 3. n in the instruction	claim here ai more than two n booklet.)	nd show both priority a priority unsecured cla	nd nonpriority amour aims, fill out the Cont	Nonpriority amount
 Do any creditors head No. Go to Part 2 Yes. List all of your price identify what type of possible, list the clair Part 1. If more than (For an explanation Illinois Dep Priority Creditor Bankruptcy 	ority unsecured claims. If a claim it is. If a claim has be some creditor holds a particular of each type of claim, see the partment of Revenue it's Name y Section	aims against you? a creditor has more than or oth priority and nonpriority according to the creditor's naular claim, list the other credithe instructions for this form	amounts, list that me. If you have r ditors in Part 3. n in the instruction account number	claim here ai more than two n booklet.)	nd show both priority a priority unsecured cla Total claim	nd nonpriority amour aims, fill out the Cont Priority amount	nts. As much as inuation Page of Nonpriority amount
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No. Go to Part 2 Yes. List all of your price identify what type of possible, list the clair Part 1. If more than (For an explanation Illinois Dep Priority Creditor Bankruptcy PO Box 643 Chicago, IL Number Street	ority unsecured claims. If a claim it is. If a claim has beins in alphabetical order acone creditor holds a particular of each type of claim, see to consider the constant of	aims against you? a creditor has more than or oth priority and nonpriority a coording to the creditor's na plar claim, list the other credithe instructions for this form Last 4 digits of a When was the december 4.	amounts, list that me. If you have r ditors in Part 3. n in the instruction account number ebt incurred?	claim here al more than two n booklet.) r	nd show both priority a priority unsecured class and claim \$379.00	nd nonpriority amour aims, fill out the Cont Priority amount	nts. As much as inuation Page of Nonpriority amount
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No. Go to Part 2 Yes. List all of your price identify what type of possible, list the clair Part 1. If more than (For an explanation Illinois Dep Priority Creditor Bankruptcy PO Box 643; Chicago, IL Number Street Who incurred the Debtor 1 only	ority unsecured claims. If a claim it is. If a claim has beins in alphabetical order acone creditor holds a particular of each type of claim, see the partment of Revenuer's Name y Section 338 _ 60664-0338 City State Zip Code edebt? Check one.	aims against you? a creditor has more than or oth priority and nonpriority a coording to the creditor's naular claim, list the other credithe instructions for this form Last 4 digits of a When was the d As of the date you Contingent Unliquidated	amounts, list that me. If you have r ditors in Part 3. In the instruction account number ebt incurred? ou file, the claim	claim here almore than two n booklet.) r	nd show both priority a priority unsecured class and claim \$379.00	nd nonpriority amour aims, fill out the Cont Priority amount	nts. As much as inuation Page of Nonpriority amount
No. Go to Part 2 Yes. List all of your price identify what type of possible, list the clair Part 1. If more than (For an explanation Illinois Dep Priority Creditor Bankruptcy PO Box 643 Chicago, ILL Number Street Who incurred the Debtor 1 only Debtor 2 only	ority unsecured claims. If a claim it is. If a claim has beins in alphabetical order acone creditor holds a particular of each type of claim, see the partment of Revenuer's Name y Section 338 _ 60664-0338 City State Zip Code edebt? Check one.	aims against you? a creditor has more than or oth priority and nonpriority a coording to the creditor's na plar claim, list the other credithe instructions for this form Last 4 digits of a When was the d As of the date you Contingent Unliquidated Disputed	amounts, list that me. If you have reditors in Part 3. In the instruction account number ebt incurred? Out file, the claim	claim here almore than two n booklet.) r	nd show both priority a priority unsecured class and claim \$379.00	nd nonpriority amour aims, fill out the Cont Priority amount	nts. As much as inuation Page of Nonpriority amount
1. Do any creditors h. No. Go to Part 2 Yes. 2. List all of your price identify what type of possible, list the clait Part 1. If more than (For an explanation 1. Illinois Dep Priority Credito Bankruptcy PO Box 64: Chicago, IL Number Street Who incurred the Debtor 1 only Debtor 2 only At least one of	ority unsecured claims. If a claim it is. If a claim has be sims in alphabetical order acone creditor holds a particular of each type of claim, see the partment of Revenuer's Name y Section 338 _ 60664-0338 City State Zlp Code e debt? Check one.	a creditor has more than or oth priority and nonpriority a coording to the creditor's naular claim, list the other credithe instructions for this form Last 4 digits of a When was the d As of the date you Contingent Unliquidated Disputed Type of PRIORIT	amounts, list that me. If you have r ditors in Part 3. In the instruction account number lebt incurred? Ou file, the claim TY unsecured claport obligations	claim here almore than two n booklet.) r 2014 n is: Check a	Total claim \$379.00	nd nonpriority amour aims, fill out the Cont Priority amount	nts. As much as inuation Page of Nonpriority amount
1. Do any creditors h. No. Go to Part 2 Yes. 2. List all of your price identify what type of possible, list the clait Part 1. If more than (For an explanation 1. Illinois Dep Priority Credito Bankruptcy PO Box 64: Chicago, IL Number Street Who incurred the Debtor 1 only Debtor 2 only At least one of	prity unsecured claims. If a claim it is. If a claim has be time in alphabetical order acone creditor holds a particular of each type of claim, see the partment of Revenue r's Name y Section 338 - 60664-0338 City State ZIp Code a debt? Check one.	a creditor has more than or oth priority and nonpriority a coording to the creditor's naular claim, list the other credithe instructions for this form Last 4 digits of a When was the d As of the date you Contingent Unliquidated Disputed Type of PRIORIT Domestic sup	amounts, list that me. If you have r ditors in Part 3. In in the instruction account number ebt incurred? Ou file, the claim TY unsecured claport obligations rtain other debts	claim here almore than two n booklet.) r 2014 n is: Check a	Total claim \$379.00	nd nonpriority amour aims, fill out the Cont Priority amount	nts. As much as inuation Page of Nonpriority amount

Income Taxes

☐ Yes

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Debtor 1 Yvonne L. Williams	——————————————————————————————————————	Case nu	mber (if know)		
2 IRS	Last 4 digits of account number		\$1,981.00	\$1,981.00	\$0.00
Priority Creditor's Name Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?	2010			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all t	hat apply		
Who incurred the debt? Check one.	☐ Contingent				
■ Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
☐ At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	Taxes and certain other debts	you owe the go	overnment		
Is the claim subject to offset?	Claims for death or personal in	jury while you	were intoxicated		
■ No	Other. Specify				
Yes	Income Ta	xes			
 List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2. 	laim. For each claim listed, identify w	hat type of clai	m it is. Do not list claims	already included in Pa	art 1. If more on Page of
4 1	Land A. Parka and a constraint and			i otai cia	
Advocate Illinois Masonic Nonpriority Creditor's Name 701 Lee Street Des Plaines, IL 60016	Last 4 digits of account numl When was the debt incurred?				\$221.00
Number Street City State Zlp Code	As of the date you file, the cla	im is: Check a	all that apply		
Who incurred the debt? Check one.					
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
\square At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:			
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a	separation agre	eement or divorce that ye	ou did not	
Is the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sh		nd other similar debts		
□ Yes	Other, Specify Collection	ons			

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4.2	Advocate Illinois Masonic	Last 4 digits of account number	\$150.00
	Nonpriority Creditor's Name		
	701 Lee Street	When was the debt incurred?	_
	Des Plaines, IL 60016 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections	_
4.3	Advocate Medical Group Nonpriority Creditor's Name	Last 4 digits of account number 4803	\$266.00
	701 Lee St.	When was the debt incurred? 3/15	
	Des Plaines, IL 60016		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	_
4.4	AMEX	Last 4 digits of account number 2984	\$1,626.00
	Nonpriority Creditor's Name		Ψ1,020.00
	Bankruptcy Department PO Box 981535	When was the debt incurred? 08/13	_
	El Paso, TX 79998-1535	As af the data was file the plains in Obsal, all that are he	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Purchases	
		• • •	

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4.5	Cap One	Last 4 digits of account number	1183	\$2,407.00
	Nonpriority Creditor's Name Bankruptcy Dept. PO Box 30285	When was the debt incurred?	12/05	
	Salt Lake City, UT 84130-0285 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Judgment		
4.6	Cap One Nonpriority Creditor's Name	Last 4 digits of account number	2462	\$1,231.00
	Bankruptcy Dept. PO Box 30285	When was the debt incurred?	01/06	
	Salt Lake City, UT 84130-0285 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Purchases		
4.7	Cap One Nonpriority Creditor's Name	Last 4 digits of account number	1533	\$1,399.00
	Bankruptcy Dept. PO Box 30285	When was the debt incurred?	01/15	
	Salt Lake City, UT 84130-0285 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Collections	3	

Debtor 1 Yvonne L. Williams

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Chase/Bank One Card Serv	Last 4 digits of account number	8478	\$3,554.00
Nonpriority Creditor's Name PO Box 15298	When was the debt incurred?	06/07	
Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Purchases		
9 Chase/Bank One Card Serv Nonpriority Creditor's Name	Last 4 digits of account number	5161	\$5,314.00
PO Box 15298 Wilmington, DE 19850	When was the debt incurred?	06/06	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Purchases		
Credit One	Last 4 digits of account number	3379	\$2,125.00
Nonpriority Creditor's Name Bankrupcty Department PO Box 98873	When was the debt incurred?	03/15	
Las Vegas, NV 89193 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharir	og plans, and other similar debts	
	, ,	•	
Yes	■ Other. Specify Collections	3	

Debtor 1 Yvonne L. Williams

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Dell Financial Services WEB Bank	Last 4 digits of account number	5986	\$368.0
Nonpriority Creditor's Name PO Box 81607	When was the debt incurred?	01/08	
Austin, TX 78708 Number Street City State Zlp Code	As of the date you file, the claim i	in Charle all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан тас арру	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other Specify Purchases		
First National Cerdit Card Nonpriority Creditor's Name	Last 4 digits of account number	3103	\$427.
500 E. 60th St. N Sioux Falls, SD 57104-0478	When was the debt incurred?	12/11	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other. Specify Purchases		
First National County Count		E0E2	# 440
First National Cerdit Card Nonpriority Creditor's Name	Last 4 digits of account number	5053	\$446.
500 E. 60th St. N	When was the debt incurred?	12/13	
Sioux Falls, SD 57104-0478 Number Street City State Zlp Code	As of the date you file, the claim i	is. Chack all that annly	
Who incurred the debt? Check one.	As of the date you me, the claim	в. Опеск ан шак арргу	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify Purchases		

Debtor 1 Yvonne L. Williams

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4.1 4	Merrick Bank	Last 4 digits of account number	5285	\$2,890.00
	Nonpriority Creditor's Name PO Box 1500	When was the debt incurred?	08/11	
	Draper, UT 84020 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Purchases		
4.1 5	Midwest Diagnostic Pathology, SC	Last 4 digits of account number	3453	\$76.00
	Nonpriority Creditor's Name			
	PO Box 578 Park Ridge, IL 60068-0578	When was the debt incurred?	3/15	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes		ig plans, and other similar debts	
	☐ Yes	Other. Specify Medical		
4.1 6	Peoples Energy	Last 4 digits of account number	1142	\$17.00
	Nonpriority Creditor's Name 200 E. Randolph Chicago, IL 60601	When was the debt incurred?	10/1982	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	■ Other Specify Purchases		

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4.1	Primary Care Medical Associates	Look 4 digito of account number	3414	\$90.00
<i>'</i>	Nonpriority Creditor's Name 700 E. Ogden Ave. #205	Last 4 digits of account number When was the debt incurred?	3/13	
	Westmont, IL 60559 Number Street City State Zlp Code	As of the date you file, the claim i	e. Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim i	S. Offeck all triat apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical		-
4.1	US Bank RMS CC Nonpriority Creditor's Name	Last 4 digits of account number	3682	\$1,329.00
	205 W. 4th Street 3rd Floor	When was the debt incurred?	12/07	-
	Cincinnati, OH 45202 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
		_		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated		
		☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	■ Other. Specify Purchases		
	— 165	Other. Specify		-
is tr	3: List Others to Be Notified About a De this page only if you have others to be notified ying to collect from you for a debt you owe to se e more than one creditor for any of the debts th	about your bankruptcy, for a debt that y	Parts 1 or 2, then list the collection agenc	y here. Similarly, if you
noti	fied for any debts in Parts 1 or 2, do not fill out	or submit this page.	•	•
	and Address ocate Illinois masonic Medical C	On which entry in Part 1 or Part 2 did you		
	Wellington Ave		Part 1: Creditors with Priority Unsecured Cla	
	ago, IL 60657	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured	Claims
Name	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
AME			Part 1: Creditors with Priority Unsecured Cla	ims
PO E	: Bankruptcy Department Box 297871	•	Part 2: Creditors with Nonpriority Unsecured	Claims
Fort	Lauderdale, FL 33329	Last 4 digits of account number		
	and Address and Gaines, P.C.	On which entry in Part 1 or Part 2 did you Line 4.5 of (Check one):	list the original creditor? Part 1: Creditors with Priority Unsecured Cla	ims
Banl 661	krupty Department N. Glenn Ave. eling, IL 60090		Part 2: Creditors with Nonpriority Unsecured	
	3 ,	Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	

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Page 27 of 54 Case number (if know) Debtor 1 Yvonne L. Williams Capital 1 Bank Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: General Correspondence Part 2: Creditors with Nonpriority Unsecured Claims Po Box 30285 Salt Lake City, UT 84130 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Capital 1 Bank Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: General Correspondence ■ Part 2: Creditors with Nonpriority Unsecured Claims Po Box 30285 Salt Lake City, UT 84130 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital 1 Bank Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: General Correspondence ■ Part 2: Creditors with Nonpriority Unsecured Claims Po Box 30285 Salt Lake City, UT 84130 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One Bank Usa N Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 15000 Capital One Dr Part 2: Creditors with Nonpriority Unsecured Claims Richmond, VA 23238 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Capital One Bank Usa N Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 15000 Capital One Dr Part 2: Creditors with Nonpriority Unsecured Claims Richmond, VA 23238 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One Bank Usa N Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 15000 Capital One Dr Part 2: Creditors with Nonpriority Unsecured Claims Richmond, VA 23238 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Capital One, N.A. Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 71083 Part 2: Creditors with Nonpriority Unsecured Claims Charlotte, NC 28272-1083 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One, N.A. Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 71083 Part 2: Creditors with Nonpriority Unsecured Claims Charlotte, NC 28272-1083 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One, N.A. Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 71083 Part 2: Creditors with Nonpriority Unsecured Claims Charlotte, NC 28272-1083 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? ICS Collection Service, Inc. Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 1010 ■ Part 2: Creditors with Nonpriority Unsecured Claims Tinley Park, IL 60477 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Illinois Department of Revenue Line 2.2 of (Check one): ■ Part 1: Creditors with Priority Unsecured Claims **Bankruptcy Section** ☐ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 64338 Chicago, IL 60664-0338 Last 4 digits of account number

Name and Address Official Form 106 E/F On which entry in Part 1 or Part 2 did you list the original creditor?

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	Case number (if know)			
Line 2.1 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims			
Last 4 digits of account number				
On which entry in Part 1 or Part	2 did you list the original creditor?			
Line 4.10 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Last 4 digits of account number				
On which entry in Part 1 or Part	2 did you list the original creditor?			
Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Last 4 digits of account number				
On which entry in Part 1 or Part	2 did you list the original creditor?			
Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
	■ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number On which entry in Part 1 or Part Line 4.10 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part Line 4.2 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	2,360.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	2,360.00
				7	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	23,936.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	23,936.00

Last 4 digits of account number

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		1700.11111	<u> </u>	
Fill in this inform	nation to identify your	case:		
Debtor 1	Yvonne L. Willian	ns		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Noble Square Cooperative
1165 N. Milwaukee Ave
Chicago, IL 60622

State what the contract or lease is for
Month to Month

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Page 30 of 54 Document Fill in this information to identify your case: Debtor 1 Yvonne L. Williams First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106H **Schedule H: Your Codebtors** 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. ■ No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 2: The creditor to whom you owe the debt Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Check all schedules that apply: 3.1 ☐ Schedule D. line Name ☐ Schedule E/F. line ☐ Schedule G, line Number Street City State ZIP Code 3.2 ☐ Schedule D, line Name ☐ Schedule E/F, line ☐ Schedule G, line _ Number

State

City

ZIP Code

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Fill	in this information to ider	ntify your ca	ise:									
Del	otor 1 Yvo	nne L. W	illiams				_					
	otor 2						_					
Uni	ted States Bankruptcy Co	ourt for the	NORTHERN DISTRIC	CT OF ILLIN	IOIS							
	se number nown)			-						ed filing ent showing	g postpetition ollowing date:	chapter
0	fficial Form 10	<u>61</u>						Ī	/IM / DD/ Y	/YYY		
S	chedule I: You	ur Inco	ome									12/1
sup spo atta	as complete and accura plying correct informati use. If you are separate ch a separate sheet to the describe Emplement 1:	on. If you d and you his form. (are married and not filion r spouse is not filing wi	ng jointly, a ith you, do	and your spo not include	ouse i inforr	s liv natio	ing with on abou	you, incl t your spo	ude inform ouse. If mo	nation about ore space is r	your needed,
1.	Fill in your employme information.	nt		Debtor 1					Debtor 2	2 or non-fil	ling spouse	
	If you have more than o		Francisco de la constantica	■ Emplo	oyed				☐ Empl	oyed		
	attach a separate page information about addit		Employment status	☐ Not er	mployed				☐ Not e	mployed		
	employers.		Occupation	Operati	ons Specia	list						
	Include part-time, seaso self-employed work.	onal, or	Employer's name	Private	Bank & Tru	ıst						
	Occupation may include or homemaker, if it app		Employer's address	_	_aSalle St. o, IL 60603							
			How long employed to	here?	6 Years							
Par	rt 2: Give Details A	About Mon	thly income									
	mate monthly income a	s of the da		you have no	othing to repo	ort for	any l	line, write	e \$0 in the	space. Inc	clude your non	n-filing
	u or your non-filing spous e space, attach a separat			ombine the i	information fo	or all e	emplo	oyers for	that perso	on on the lir	nes below. If y	ou need
								For De	btor 1		otor 2 or ng spouse	
2.			y, and commissions (balculate what the monthle			2.	\$	4	,643.00	\$	N/A	
3	Estimate and list mon	thly overti	me nav			3	+ \$		0.00	+ \$	N/A	

4,643.00

N/A

Calculate gross Income. Add line 2 + line 3.

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Debt	or 1	Yvonne L. Williams	_	Case r	number (if known)		
				For	Debtor 1		otor 2 or
	Сор	by line 4 here	4.	\$	4,643.00	\$	ng spouse N/A
5.	List	t all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	867.00	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	141.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	70.00	\$	N/A
	5e.	Insurance	5e.	\$	211.00	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues	5g.	\$	0.00	\$	N/A
	5h.	Other deductions. Specify: Aflac Accident	5h.+	\$		+ \$	N/A
		Aflac Illiness		\$	63.00	\$	N/A
		Vol Insurance	_	\$	17.00	\$	N/A
		Ltd pre		\$	8.00	\$	N/A
ŝ.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	1,523.00	\$	N/A
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	* — \$	-	\$	N/A
8.		t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			3,120.00	·	
		monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A
	8e.	Social Security	8e.	\$	0.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$_	3	3,120.00 + \$_	N	\$ 3,120.0
11.	Incluothe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	depend		•	ed in <i>Sche</i>	edule J. 11. +\$ 0. (
12.		d the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certailies				, if it	12. \$ 3,120.0
13.	Do <u>'</u>	you expect an increase or decrease within the year after you file this form	1?				Combined monthly income
		No.					

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Fill	in this information to identify y	our case:					
Deb	tor 1 Yvonne L. W	/illiams			Ch	eck if this is:	
						An amended filing	
	tor 2 buse, if filing)						wing postpetition chapter the following date:
(Opt	ruse, ii minig)						
Unit	ed States Bankruptcy Court for the	: NORTI	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number						
(If Ki	nown)						
Of	fficial Form 106J						
	chedule J: Your	Exper	nses				12/15
Be info	ormation. If more space is ne nber (if known). Answer eve	s possible eded, atta	. If two married people ar ach another sheet to this				
Par		ehold					
1.	Is this a joint case?						
	■ No. Go to line 2.□ Yes. Does Debtor 2 live	in a separ	rate household?				
	☐ No ☐ Yes. Debtor 2 mu	st file Offic	ial Form 106J-2, <i>Expense</i> s	for Separate House	hold of De	ebtor 2.	
2.	Do you have dependents?	■ No					
	Do not list Debtor 1 and Debtor 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.						☐ Yes
							□ No
							☐ Yes
							□ No
							Yes
							□ No
3.	Do your expenses include		I _{No}				☐ Yes
	expenses of people other to yourself and your depende	han _	l Yes				
Est exp	Estimate Your Ongoi imate your expenses as of y enses as of a date after the dicable date.	our bankr	uptcy filing date unless y				
the	ude expenses paid for with value of such assistance an icial Form 106l.)					Your exp	enses
4.	The rental or home owners			nclude first mortgage			000.00
	payments and any rent for th	e ground o	or lot.		4.	\$	900.00
	If not included in line 4:						
	4a. Real estate taxes				4a.	·	0.00
	4b. Property, homeowner'				4b.		0.00
	4c. Home maintenance, re				4c.	·	0.00
	4d. Homeowner's associa	แบบ บา บบ	uominium uues		4d.	Φ	0.00

5. \$

0.00

Additional mortgage payments for your residence, such as home equity loans

Deb	tor 1	Yvonne	L. Williams	Case num	nber (if known)	
6.	Utiliti	ies:				
٥.	6a.		, heat, natural gas	6a.	\$	125.00
	6b.	•	wer, garbage collection	6b.	\$	0.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	100.00
	6d.	Other. Sp	ecify:	6d.	\$	0.00
7.	Food	and hous	ekeeping supplies	7.	\$	403.00
8.	Child	dcare and o	children's education costs	8.	\$	0.00
9.	Cloth	ning, laund	lry, and dry cleaning	9.	\$	100.00
10.	Perso	onal care p	products and services	10.	\$	102.00
11.	Medi	ical and de	ntal expenses	11.	\$	60.00
12.			Include gas, maintenance, bus or train fare.			400.00
			ar payments.	12.	·	400.00
13.			clubs, recreation, newspapers, magazines, and books	13.		75.00
14.			ributions and religious donations	14.	\$	100.00
15.		rance.	and the second s			
		ot include ir Life insura	nsurance deducted from your pay or included in lines 4 or 20). 15a.	¢	0.00
		Health ins		15a. 15b.		0.00
		Vehicle in		15b. 15c.	*	80.00
			urance. Specify:	15d.		
16			nance. Specify. nclude taxes deducted from your pay or included in lines 4 o		Φ	0.00
10.	Speci		icide taxes deducted from your pay or included in lines 4 o	1 20. 16.	\$	0.00
17.	Insta	Ilment or I	ease payments:			
			ents for Vehicle 1	17a.	\$	550.00
	17b.	Car paym	ents for Vehicle 2	17b.	\$	0.00
	17c.	Other. Sp	ecify:	17c.	\$	0.00
	17d.	Other. Sp	ecify:	17d.	\$	0.00
18.			of alimony, maintenance, and support that you did not		c	0.00
10			your pay on line 5, Schedule I, Your Income (Official Fo	rm 106l). 18.	·	
19.			s you make to support others who do not live with you.	10	\$	0.00
20	Speci	·	erty expenses not included in lines 4 or 5 of this form o	19.		
20.			s on other property	20a.		0.00
		Real estat		20b.		0.00
			homeowner's, or renter's insurance	20c.	· 	0.00
			nce, repair, and upkeep expenses	20d.	·	0.00
			ner's association or condominium dues	20e.		0.00
21.		r: Specify:	Auto Maintenance		+\$	125.00
						123.00
22.			monthly expenses			
			through 21.		\$	3,120.00
	22b. (Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form	n 106J-2	\$	
	22c. /	Add line 22	a and 22b. The result is your monthly expenses.		\$	3,120.00
23.	Calcu	ulate your	monthly net income.			
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	3,120.00
	23b.	Copy you	r monthly expenses from line 22c above.	23b.	-\$	3,120.00
	23c.		our monthly expenses from your monthly income.	20		0.00
		The result	t is your monthly net income.	23c.	\$	0.00
24.	For ex modifi	xample, do yo ication to the	an increase or decrease in your expenses within the year ou expect to finish paying for your car loan within the year or do you terms of your mortgage?			ase or decrease because of a
	■ No		Evnlain here:			

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Fill in this inform	nation to identify your	case:			
Debtor 1	Yvonne L. Willian	ns			
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle News	Lost Nome		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				_	neck if this is an
				an	nended filing
Official Form	106Dec				
		ا میداد این این ما	Dalataria Cal	la a alvula a	
Declarati	ion About a	an Individual	Deptor's Sc	neaules	12/15
•	Below	1319, and 3371.			
Did you pay	or agree to pay some	eone who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
□ Yes. N	ame of person			Attach Bankruptcy Petitic	on Prenarer's Notice
				Declaration, and Signatur	
	ty of perjury, I declare true and correct.	that I have read the sum	mary and schedules filed	I with this declaration and	
X /s/ Yvor	nne L. Williams		X		
	L. Williams		Signature of D	Debtor 2	
	e of Debtor 1		- 3 ,		
Date A	pril 25, 2016		Date		

Fill	in this inforn	nation to identify you	r case:							
Deb	tor 1	Yvonne L. Willia	ms							
L.		First Name	Middle Name	Last Name						
	tor 2 use if, filing)	First Name	Middle Name	Last Name						
Unit	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS						
Cas (if kno	e number own)				_	heck if this is an mended filing				
Sta Be a	s complete a	of Financial		re filing together, both are	ankruptcy equally responsible for suppy y additional pages, write you					
	ber (if knowi	n). Answer every ques			, adamona, pagoo, milo you	. name and ease				
		r current marital statu								
	☐ Married■ Not mar	ried								
2.	During the la	ast 3 years, have you	lived anywhere other than v	where you live now?						
	No	No.								
	_	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.								
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
					ity property state or territory co, Texas, Washington and W					
	■ No □ Yes. Ma	ike sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	ficial Form 106H).						
Part	2 Explai	n the Sources of You	r Income							
	Fill in the total	al amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	ill businesses, including part-		dar years?				
	□ No ■ Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$15,730.00	☐ Wages, commissions, bonuses, tips					

☐ Operating a business

Operating a business

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Page 37 of 54 Document Case number (if known) Debtor 1 Yvonne L. Williams Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$47,419.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$46,316.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Creditor's Name and Address Amount you Was this payment for ... Dates of payment **Total amount** still owe paid

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Debtor 1 Yvonne L. Williams

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7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos No		ments or transfer a	iny property on a	eccount of a de	ebt that benefited an		
	Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name		
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures						
9.	Within 1 year before you filed for bankrupture. List all such matters, including personal injury modifications, and contract disputes.	cy, were you a party in an cases, small claims actions	y lawsuit, court ac s, divorces, collectio	tion, or administ n suits, paternity a	rative proceed actions, support	ing? t or custody		
	Yes. Fill in the details.							
	Case title Case number	Nature of the case	Nature of the case Court or agency		Status of the case			
	Capital One	Collection	Cook County, I	L	Pending			
	vs Yvonne Williams 15 m1 131183				☐ On appe☐ Conclude			
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below.		erty repossessed, f	oreclosed, garni	shed, attached	l, seized, or levied?		
	Creditor Name and Address	Describe the Property		Date		Value of the		
		Explain what happened	I			property		
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		luding a bank or fir	nancial institution	n, set off any a	mounts from your		
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount		
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a No Yes		erty in the possess	ion of an assigne	ee for the bene	fit of creditors, a		

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Debtor 1 Yvonne L. Williams

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Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers	Pai	t 5: List Certain Gifts and Contribution	ıs			
Date	13.	■ No	uptcy,	did you give any gifts with a total value of more t	han \$600 per person	?
14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No		Gifts with a total value of more than \$60 per person		Describe the gifts		Value
No						
Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Include the amount that insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You David M. Slegel & Associates 790 ChaSlegel & Associates 790 ChaSleg	14.	■ No			al value of more than	\$600 to any charity?
more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? No Yes. Fill in the details. Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance colaims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Person Who Was Paid Description and value of any property Date payment Amount of		, and the second			Dates you	Value
15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? No		more than \$600 Charity's Name		besoribe what you contributed		Value
or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090 Attorney Fees 3/2/16-4/15/16 \$600.00 To not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.	Pai	t 6: List Certain Losses				
Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090 David Mode the Payment or transfer that you listed on line 16. David Mode the poud deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Description and value of any property Date payment transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Person Who Was Paid Description and value of any property Date payment Amount of	15.	or gambling?	iptcy o	r since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster,
Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Mac the Payment, if Not You David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090 Attorney Fees Attorney Fees Description and value of any property transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Description and value of any property Date payment Date payment Date payment Date payment Amount of Description and value of any property Date payment Date Pay		☐ Yes. Fill in the details.				
16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090 Attorney Fees 3/2/16-4/15/16 \$600.00 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of			Includ	de the amount that insurance has paid. List pending	•	Value of property lost
16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090 Attorney Fees 3/2/16-4/15/16 \$600.00 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of	Pai	t 7: List Certain Payments or Transfers	s			
Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090 Attorney Fees Attorney Fees 3/2/16-4/15/16 \$600.00 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of ransfer was made Attorney Fees 3/2/16-4/15/16 \$600.00 Population of transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.		Within 1 year before you filed for bankru consulted about seeking bankruptcy or	ptcy, o	ing a bankruptcy petition?		rty to anyone you
Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090 Attorney Fees Attorney Fees Attorney Fees 3/2/16-4/15/16 \$600.00 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of payment or transfer was made Attorney Fees 3/2/16-4/15/16 \$600.00 Attorney Fees Jerson Who Was Paid Date payment Date payment Amount of		□ No				
Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Description and value of any property Date payment Amount of		_				
David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of		Person Who Was Paid Address Email or website address	⁄ou		or transfer was	Amount of payment
promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ■ No □ Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of		David M. Siegel & Associates 790 Chaddick Drive		Attorney Fees	3/2/16-4/15/16	\$600.00
	17.	promised to help you deal with your cree Do not include any payment or transfer that No	ditors	or to make payments to your creditors?	or transfer any prope	rty to anyone who
A MAN DOD DI MAN						Amount of

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ase number (*if known*)

Debtor 1 Yvonne L. Williams

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Last balance Date account was account number closed, sold, Address (Number, Street, City, State and ZIP instrument before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Describe the contents Do you still Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code)

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 Yvonne L. Williams

		substances, wastes, or material into the lations controlling the cleanup of these			dwat	er, or other medium, including s	tatutes or		
	to own, operate, or utilize it, including disposal sites.								
	 Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. 								
Rep	ort all	I notices, releases, and proceedings tha	it yo	u know about, regardless of wher	n the	y occurred.			
24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
		No							
		Yes. Fill in the details.							
		ne of site Iress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice		
25.	Have	you notified any governmental unit of	any	release of hazardous material?					
		No							
		Yes. Fill in the details.							
		ne of site Iress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice		
26.	Have	you been a party in any judicial or adm	ninis	trative proceeding under any envi	ironn	nental law? Include settlements	and orders.		
		No							
		Yes. Fill in the details.		0	NI-1	(01-1		
		e Title e Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case		
Par	t 11:	Give Details About Your Business or 0	Coni	nections to Any Business					
27.	With	in 4 years before you filed for bankrupto	cy, c	lid you own a business or have ar	y of	the following connections to an	y business?		
		☐ A sole proprietor or self-employed in	n a t	rade, profession, or other activity,	eith	er full-time or part-time			
		☐ A member of a limited liability comp	any	(LLC) or limited liability partnersh	ip (L	LP)			
		☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation								
		☐ An owner of at least 5% of the voting	or or	equity securities of a corporation					
		No. None of the above applies. Go to P	art 1	12.					
		Yes. Check all that apply above and fill							
	Bus	iness Name Iress		scribe the nature of the business		Employer Identification number Do not include Social Security			
		ber, Street, City, State and ZIP Code)	Naı	me of accountant or bookkeeper		•			
						Dates business existed			

Part 12: Sign Below

Name

Address

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial

Date Issued

institutions, creditors, or other parties.

☐ Yes. Fill in the details below.

(Number, Street, City, State and ZIP Code)

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are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Yvonne L. Williams Signature of Debtor 2 Yvonne L. Williams Signature of Debtor 1 Date April 25, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information					
	Ation to identify your o				
Debtor 1	Yvonne L. William First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	cruptcy Court for the:	NORTHERN DIST	FRICT OF ILLINOIS		
	, ,				
Case number (if known)					☐ Check if this is an amended filing
Official For	m 108				
Statement	of Intentio	n for Indiv	riduals Filing Unde	er Chapter	7 12/15
■ creditors have of you have leased You must file this	er is earlier, unless the	ur property, or nd the lease has n ithin 30 days after		or by the date set for end copies to the c	or the meeting of creditors, reditors and lessors you list
If two married peop		in a joint case, bo	th are equally responsible for sup	oplying correct info	rmation. Both debtors must
	d accurate as possib Ir name and case nun		needed, attach a separate sheet	to this form. On the	e top of any additional pages,
Part 1: List You	r Creditors Who Have	Secured Claims			
1. For any creditors		rt 1 of Schedule D	: Creditors Who Have Claims Sec	ured by Property (C	Official Form 106D), fill in the
	itor and the property th	nat is collateral	What do you intend to do with secures a debt?	the property that	Did you claim the property as exempt on Schedule C?
Creditor's Kia	Motors Finance		☐ Surrender the property. ☐ Retain the property and redee	om it	□ No
	2007 Hyandai Sona	nta	Retain the property and enter		■ Yes
property	Kia Motors Finance Secured Lien \$4,02	9	Reaffirmation Agreement. Retain the property and [expla	nin]:	
securing debt:	Secured Lien \$4,02	.5.00			
	r Unexpired Personal				
in the information	below. Do not list rea	l estate leases. Un	in Schedule G: Executory Contra expired leases are leases that are the trustee does not assume it. 11	still in effect; the le	
Describe your une	expired personal prop	erty leases		W	/ill the lease be assumed?
Lessor's name:	Noble Square	Cooperative] No
					Yes
Description of lease Property:	ed Month to Mont	h			
Part 3: Sign Bel	low				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Deb	otor 1 Yvonne L. Williams	Case number (if known)
	er penalty of perjury, I declare that I have indicated my berty that is subject to an unexpired lease. /s/ Yvonne L. Williams	intention about any property of my estate that secures a debt and any personal
	Yvonne L. Williams	Signature of Debtor 2
	Signature of Debtor 1	
	Date April 25, 2016	Date

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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-13978 Doc 1 Filed 04/25/16 Entered 04/25/16 12:34:43 Desc Main Document Page 49 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Yvonne L. Wi	lliams	S		Case No.	
				Debtor(s)	Chapter	7
				MPENSATION OF ATTO		` ,
C	compensation paid t	o me v	within one year before	P. 2016(b), I certify that I am the attor the filing of the petition in bankruptcy plation of or in connection with the ba	y, or agreed to be paid	to me, for services rendered or to
	For legal service	es, I h	nave agreed to accept		s	1,600.00
	Prior to the fili	ng of t	this statement I have re	ceived	\$	600.00
	Balance Due				\$	1,000.00
2.	The source of the co	mpens	sation paid to me was:			
	Debtor		Other (specify):			
3.	The source of comp	ensatio	on to be paid to me is:			
	Debtor		Other (specify):			
4.	■ I have not agree	d to sh	hare the above-disclose	ed compensation with any other person	n unless they are men	abers and associates of my law firm.
				ompensation with a person or persons f the names of the people sharing in th		
5.	In return for the abo	ve-dis	sclosed fee, I have agre	eed to render legal service for all aspec	cts of the bankruptcy	case, including:
t C	b. Preparation and c. Representation of d. [Other provision Negotiati agreeme	filing of the d s as ne ons w nts an	of any petition, schedulebtor at the meeting of eeded] vith secured creditor	nd rendering advice to the debtor in de les, statement of affairs and plan which f creditors and confirmation hearing, a pres to reduce to market value; ex- needed; preparation and filing of goods.	ch may be required; and any adjourned hea cemption planning	arings thereof;
6. I	Represer	tation		osed fee does not include the following any dischargeability actions, jucoceeding.		es (except in Chapter 13
				CERTIFICATION		
	I certify that the foreankruptcy proceedi		g is a complete statement	nt of any agreement or arrangement for	or payment to me for	representation of the debtor(s) in
_A	pril 25, 2016			/s/ David M. Sieg	gel	
D	ate			David M. Siegel	100	
				Signature of Attorn David M. Siegel 790 Chaddick D	& Associates	

Wheeling, IL 60090 (847) 520-8100 Name of law firm

Important Bankruptcy Information

Debts that are Discharged

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

Debts that are Not Discharged

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

- a) Debts for most taxes;
- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;
- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated:
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;
- h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

Н.	The FLAT FEE for	epresentation in this matter will be \$
		as read this agreement in its entirety, understands it fully, has had an any this agreement, is satisfied with it, and accepts it in its entirety.
Date:	3-1-14	Signed: June Will
		Print: Wonne Williams
Date:		Signed:
		Print:
	~ / /	
Date:	3/1/16	Signed: Attorney for David M. Siegel

United States Bankruptcy Court Northern District of Illinois

In re	Yvonne L. Williams		Case No.	
		Debtor(s)	Chapter 7	
	VE	RIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors:	29
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	ors is true and correct to	the best of my
Date:	April 25, 2016	/s/ Yvonne L. Williams Yvonne L. Williams Signature of Debtor		

Advocate Illinois Masonic 701 Lee Street Des Plaines, IL 60016

Advocate Illinois masonic Medical C 836 Wellington Ave Chicago, IL 60657

Advocate Medical Group 701 Lee St. Des Plaines, IL 60016

AMEX
Bankruptcy Department
PO Box 981535
El Paso, TX 79998-1535

AMEX Attn: Bankruptcy Department PO Box 297871 Fort Lauderdale, FL 33329

Blitt and Gaines, P.C. Bankrupty Department 661 N. Glenn Ave. Wheeling, IL 60090

Cap One Bankruptcy Dept. PO Box 30285 Salt Lake City, UT 84130-0285

Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Capital One, N.A. PO Box 71083 Charlotte, NC 28272-1083

Chase/Bank One Card Serv PO Box 15298 Wilmington, DE 19850

Credit One Bankrupcty Department PO Box 98873 Las Vegas, NV 89193

Dell Financial Services WEB Bank PO Box 81607 Austin, TX 78708

First National Cerdit Card 500 E. 60th St. N Sioux Falls, SD 57104-0478

ICS Collection Service, Inc. P.O. Box 1010
Tinley Park, IL 60477

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

Illinois Department of Revenue Bankruptcy Section Level 7-425 100 W. Randolph St. Chicago, IL 60601

IRS
Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101-7346

Kia Financial Services 10550 Talbert Ave. Fountain Valley, CA 92708

Kia Motor Finance PO Box 650805 Dallas, TX 75265-0805 Kia Motors Finance PO Box 20835 Fountain Valley, CA 92728-0835

LVNVFunding Resurgent Capital Service PO Box 10587 Greenville, SC 29603-0587

Merrick Bank PO Box 1500 Draper, UT 84020

Midwest Diagnostic Pathology, SC PO Box 578
Park Ridge, IL 60068-0578

Peoples Energy 200 E. Randolph Chicago, IL 60601

Primary Care Medical Associates LTD 700 E. Ogden Ave. #205 Westmont, IL 60559

State Collection Service 2509 S. Stoughton Road Madison, WI 53716-3314

The Bureaus, Inc. 650 Dundee Road Suite 370 Northbrook, IL 60062-2757

US Bank RMS CC 205 W. 4th Street 3rd Floor Cincinnati, OH 45202